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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines American Dietetic Association Political Action Committee 1120 Connecticut Ave. NW ADDRESS (number and street) Suite 480 Check if different than previously Washington DC 20036 reported. (ACC) FEC IDENTIFICATION NUMBER STATE A ZIPCODE 🛋 CITY A IS THIS NEW **AMENDED** C00143560 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Χ Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: Termination Report (TER) in the Election on State of 03 0 1 2010 03 3 1 2010 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Paul A. Mifsud Type or Print Name of Treasurer Electronically Filed by Paul A. Mifsud 04 19 2010 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

SUMMARY PAGE OF RECEIPTS AND DISRUBSEMENTS

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) 2/15 Write or Type Committee Name American Dietetic Association Political Action Committee D D " D 03 0 1 2010 0.3 31 2010 From: Report Covering the Period: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2010° 57589.89 January 1 (b) Cash on Hand at 65018.36 Begining of Reporting Period 34060.33 52022.92 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 99078.69 109612.81 6(a) and 6(c) for Column B) 25098.66 35632.78 Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 73980.03 73980.03 (subtract Line 7 from Line 6(d)) Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) This Committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact:

> Federal Election Commission 999 E street, NW Washington, DC 20463

> > Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 3 / 15

Write or Type Committee Name

American Dietetic Association Political Action Committee

Report Covering the Period:

From:

м м 0 3 D D 1

2010

To:

м м 0 3 D D 31

Y Y Y Y 2 0 1 0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From: (a) Individuals/Persons Other		
Than Political Committees (i) Itemized (use Schedule A)	2740.00	4940.00
(ii) Unitemized	31320.33	47082.92
(iii) TOTAL (add Lines 11(a)(i) and (ii)	34060.33	52022.92
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)(d) Total Contributions (add Lines	0.00	0.00
11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	34060.33	52022.92
Transfers From Affiliated/Other Party Committees	0.00	0.00
3. All Loans Received	0.00	0.00
Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
7. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
9. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	34060.33	52022.92
. Total Federal Receipts (subtract Line 18(c) from Line 19)	34060.33	52022.92

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

of Disbursements

4 / 15

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Shared Federal/Non-Federal		1
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share		
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	12500.66	16122.70
	Expenditures(c) Total Operating Expenditures	13598.66	16132.78
	(add 21(a)(i), (a)(ii) and (b))	13598.66	16132.78
2.	Transfers to Affiliated/Other Party		
3.	Contributions to	0.00	0.00
	Federal Candidates/Committeesand Other Political Committees	11500.00	19500.00
4.	Independent Expenditure	0.00	0.00
5.	(use Schedule E)	0.00	0.00
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
6.	Loan Repayments Made	0.00	0.00
		0.00	0.00
	Loans Made Refunds of Contributions To:	0.00	0.00
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees		
	(such as PACs)	0.00	0.00
	(d) Total Contribution Refunds	0.00	0.00
	(add Lines 28(a), (b), and (c))	0.00	0.00
9.	Other Disbursements	0.00	0.00
0.	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share		0.00
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add	2.22	
	Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
1.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	25098.66	35632.78
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	25098.66	35632.78

DETAILED SUMMARY PAGE

of Disbursements

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	34060.33	52022.92
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	34060.33	52022.92
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	13598.66	16132.78
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	13598.66	16132.78

FE6AN026

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 15 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American Dietetic Association Politic	d Statements may not be sold or used by any pers the name and address of any political committee to cal Action Committee	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Kathleen C. Niedert Mailing Address 110 Ardis St Box 843 City Hudson FEC ID number of contributing federal political committee. Name of Employer N/a @ Present Receipt For: Primary General Other (specify)	State Zip Code IA 50643-9778 C Occupation Director, Clinical Nutrition & Aggregate Year-to-Date 250.00	Date of Receipt M M Z 2 Z Z 2 D 1 0 Transaction ID: A805E0FFDA28447098F3 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Dr. Suzanne Domel Baxter Mailing Address 109 Autumn Oaks L City Lexington FEC ID number of contributing federal political committee. Name of Employer University Of South Carolina Receipt For: Primary General Other (specify)	State Zip Code SC 29073-7148 C Occupation Rd Aggregate Year-to-Date 240.00	Date of Receipt M M / D D / Y Y Y Y Y O 3 / 2 2 / 2 0 1 0 Transaction ID: AF3BF291A15494521AFA Amount of Each Receipt this Period 240.00
Full Name (Last, First, Middle Initial) Tara J. Gidus Mailing Address 1700 Gay Dr City Orlando FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify)	State Zip Code FL 32803-1915 C Occupation Rd Aggregate Year-to-Date 500.00	Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: A55B2DE43C5E24986A6 Amount of Each Receipt this Period 500.00
SUBTOTAL of Receipts This Page (optional))	990.00

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 15 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Dietetic Association Poli	ind Statements may not be sold or used by any pers g the name and address of any political committee to itical Action Committee	
Full Name (Last, First, Middle Initial) Kathryn B. Hanlon Mailing Address 18 Hickory Hill Rd City Plantsville FEC ID number of contributing federal political committee. Name of Employer Hospital Receipt For: Primary General Other (specify)	State Zip Code CT 06479-1207 C Occupation Rd Aggregate Year-to-Date 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Transaction ID: A9246A6B2D67841C58D Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Lorri Holzberg Mailing Address 2407 Sharon Rd City Menlo Park FEC ID number of contributing federal political committee. Name of Employer Camino Medical Group Receipt For: Primary General Other (specify)	State Zip Code CA 94025-6800 C Occupation Rd Aggregate Year-to-Date 500.00	Date of Receipt M M M / D D / Y Y Y Y Y O 3 0 2 0 1 0 Transaction ID: A67097A87DCE447529E Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Lucille Beseler Mailing Address Suite 108 5901 Colonial Dr City Margate FEC ID number of contributing federal political committee. Name of Employer Family Nutrition Center Receipt For: Primary General Other (specify)	State Zip Code FL 33063-5672 C Occupation Rd Aggregate Year-to-Date ▼ 250.00	Date of Receipt M M M J D D J 2 0 1 0 Transaction ID: ABF292207873C4DBEAG Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (option	al)	1000.00

SCHEDULE A (FEC Form 3X)

SCHEDULI ITEMIZED	E A (FEC Form 3) RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one) X 11a 11b 11b 13 14	PAGE 8/15 11c
NAME OF CO	copied from such Reports ar I purposes, other than using DMMITTEE (In Full) Dietetic Association Polit		y not be sold or used by any pers dress of any political committee t nmittee	on for the purpose of solic o solicit contributions from	iting contributions such committee.
Ms. Teresa A. I Mailing Addre City Urbandale FEC ID numb federal politica Name of Emp Des Moines F Receipt For: Primary	er of contributing al committee.	State IA C Occupation Dir Of Fo	Zip Code 50322-4800 n ood Services e Year-to-Date 250.00	Date of Receipt 0 3	2 0 1 0 6B3A252E488E480DAE
Ms. Sylvia A. E Mailing Addre City Winterville FEC ID numb federal politica Name of Emp East Carolina Receipt For: Primary	ss 2405 Royal Dr 63 Fountain St er of contributing al committee.		Zip Code 28590-9140 Program Director Year-to-Date 250.00	Date of Receipt M M M / D D D D D D D D D D D D D D D D	2 0 1 0 E4C5202755F24C8AAB
C. Barbara Ann F Mailing Addre City Raleigh FEC ID numb federal politica Name of Emp Self Employee Receipt For: Primary	ss 4208 Galax Dr er of contributing al committee.		Zip Code 27612-3714 n Consultant e Year-to-Date ▼ 250.00	Date of Receipt M M M / D D D D D D D D D D D D D D D D	2 0 1 0 4C5F68DE29E04C6289
SUBTOTAL of I	Receipts This Page (optiona	ال)ا			750.00
TOTAL This Pe	eriod (last page this line num	ber only)			2740.00

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ı \	NAME OF COMMITTAMERICAN Dietetic	, ,	litical Action Com	mittee			
	Full Name (Last, First J.S. Postal Servic					Transaction ID: Date of Disburse	B534F19BCA95A4B9CI
ī	Mailing Address	1050 Connectic	ut Ave NW			03 0	$\begin{bmatrix} 0 \\ 3 \end{bmatrix}$
	Dity Washington		State DC	Zip Code 20036-5308		Amount of Each	Disbursement this Period
S	Purpose of Disburser Stamps for ADAPAC				0 0		704.00
_	Candidate Name	111	Dish		Category/ Type		
	Office Sought:	House Senate President	Disbursement For Primary Other (s	General			
F	State: Dis Full Name (Last, First Clicks	strict: , Middle Initial)				Transaction ID: Date of Disburse	 B14D9E44DB9F0484D8
Ī.	Mailing Address 1120 Connecticut Avenue NW Ste. B-100					03 1	
	Dity Washington	D 100	State DC	Zip Code 20036		Amount of Each	Disbursement this Period
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_	Candidate Name				Category/ Type		
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V	City Washington		State DC	Zip Code 20036		Amount of Each	Disbursement this Period 170.67
A	Purpose of Disburser ADAPAC Stationary a						170.07
_	Candidate Name	1			Category/ Type		
	Office Sought: State: Dis	House Senate President strict:	Disbursement For Primary Other (s	General pecify) ▼			
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S	CHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	-	PAGE 10/15
IT _	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	22 23 23 28a 28b	24 25 26 28c 29 30b
	y Information copied from such Reports and Staten for commercial purposes, other than using the nam				
	NAME OF COMMITTEE (In Full) American Dietetic Association Political Act	ion Committee			
Α.	Full Name (Last, First, Middle Initial) Membership Marketing Services, Inc.			Date of Disburse	
	Mailing Address Attn. Fran Carille 1280 Perimeter Parkway			03 1	7 2010
	Virginia Beach	State Zip Code VA 23454-5689		Amount of Each	Disbursement this Period 9431.70
	Purpose of Disbursement ADAPAC Fundraising Expenses Candidate Name	[Category/		3431.70
	Office Sought: House Senate President State: Disburse	ement For: Primary General Other (specify)	Туре		
В.	Full Name (Last, First, Middle Initial) American Dietetic Association			Date of Disburse	
	Mailing Address 120 S. Riverside Plz Suite 2000			03 1	7 2010
	City Chicago	State Zip Code IL 60606-6995		Amount of Each	Disbursement this Period
	Purpose of Disbursement ADAPAC Manager Software Candidate Name	[Cotogony		900.00
		ement For:	Category/ Type		
	Senate President State: District:	Primary General Other (specify) ▼			
С.	Full Name (Last, First, Middle Initial) U.S. Postal Service			Date of Disburse	
	Mailing Address 1050 Connecticut Ave N	W		03 1	7 2010
	Washington	State Zip Code DC 20036-5308		Amount of Each	Disbursement this Period
	Purpose of Disbursement Stamps for ADAPAC mailings Candidate Name		Category/		440.00
	Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)	Туре		
g	UBTOTAL of Disbursements This Page (optional)				10771.70
	OTAL This Period (last page this line number only)				

A.

В.

SCHEDULE B (FEC Form 3X)

District:

FOR LINE NUMBER: PAGE 11/15 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 21b 22 23 25 26 **Detailed Summary Page** 27 28a 28b 28c 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) American Dietetic Association Political Action Committee Full Name (Last, First, Middle Initial) Transaction ID: B3572270C7D7C4326A28 4imprint Date of Disbursement 0 3 2010 Mailing Address 101 Commerce St City State Zip Code Amount of Each Disbursement this Period Oshkosh WI 54901-4864 758.25 Purpose of Disbursement 2010 PPW Promotional Item Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary Other (specify) President State: District: Full Name (Last, First, Middle Initial) Transaction ID: B96C6DA8944894C36893 American Dietetic Association Date of Disbursement 26 0 3 2010 Mailing Address 120 S. Riverside Plz Suite 2000 City Zip Code State Amount of Each Disbursement this Period 60606-6995 Chicago IL 900.00 Purpose of Disbursement payment for ADAPAC software Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify)

SUBTOTAL of Disbursements This Page (optional)	•	1658.25
TOTAL This Period (last page this line number only)	•	13487.55

State:

SCHEDULE B (FEC Form 3X)

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<u> </u>	NAME OF COMMITTEE (In Full)						-			-			
\rangle	American Dietetic Association Politica	I Action Comn	nittee										
_													
	Full Name (Last, First, Middle Initial) Congresswoman Lois Capps					- 1		ction ID	_		99A6F	-4840)7/
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	City Santa Barbara	State CA	Zip Code 93121				Amoun	t of Eacl	n Disbu				į Į
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	Rep. Lois Capps [D-CA-23] Candidate Name			Cate	aon/								
	Rep. Lois Capps			Ту									
	X	bursement For:	2010			1							
	Senate President	X Primary	General										
	State: CA District: 23	Other (spe	€CITY) ♥										
	Full Name (Last, First, Middle Initial)					Τ,	Γransa	ction ID): BB	379F	79FF7	7194[)A
	Kathy Dahlkemper for Congress							Disburs					
	Mailing Address 530 Seminole Dr						0 ^M 3 M	/ D	1 1 ^D	Y	ž 0 Ť	0 ^Y	
	City	State	Zip Code				Amoun	t of Eacl	n Disbı	urseme	ent this	Period	k
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	Rep. Kathy Dahlkemper [D-PA]											-	
	Candidate Name			Cate Ty									
	Office Sought: X House Dist	bursement For:	2010 X General										
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_	State: District:												
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	Mailing Address PO Box 75214							(=)	n Diabi	ırooma	ent this	Period	 k
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	City Washington Purpose of Disbursement Rep. Earl Pomeroy [D-ND] Candidate Name Office Sought: X House Disl	DC bursement For: X Primary	20013-0214 2010 General		,		Amoun	t of Eaci	TDISDL			0	
	City Washington Purpose of Disbursement Rep. Earl Pomeroy [D-ND] Candidate Name Office Sought: X House Disl	DC bursement For:	20013-0214 2010 General		,		Amoun	t of Each	TDISDI			0	

SCHEDULE B (FEC Form 3X)

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	ose of Disbursement ort for Amy Klobuchar[D-MN]										1000.	00	
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	idate Name Patrick J. Tiberi					egory/ ype								
	Sought: X House Senate President		sement For: X Primary Other (spe	2010 General										
State:	: OH District: 12													
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SCHEDULE B (FEC Form 3X)

	CHEDULE B (F EMIZED DISB		J Use se	parate schedule(s)	FOR LINE (check onl	NUMBER: ly one)	PAGE 14/15
•••				d Summary Page	21b 27	22 X 23 28a 28b	24 25 26 28c 29 30b
	y Information copied fro						
or f	or commercial purpose		g the name and addr	ess of any political of	committee to so	olicit contributions fro	om such committee
	NAME OF COMMITT	. ,					
/	American Dietetic	Association Po	litical Action Com	mittee			
	Full Name (Last, First	, Middle Initial)				Transaction ID:	BD7C372DBACCE4748
	Cathy McMorris Ro	odgers for Cong	gress			Date of Disburse	ement
		Cathy McMorris Box 137	Rodgers for Con	gres		03 2	6 7 2010
	City Spokane		State WA	Zip Code 99210		Amount of Each	Disbursement this Period
	Purpose of Disbursen Rep. McMorris Rodge						1000.00
	Candidate Name Rep. Cathy McMor				Category/ Type		
	Office Sought: X	House Senate	Disbursement For:	General			
	State: WA Dis	President strict: 05	Other (sp	pecify)			
	Full Name (Last, First	, Middle Initial)				Transaction ID:	B0DBA1BBD67464E99
	Friends of Rosa Do	eLauro				Date of Disburse	ement
		riends of Rosa 2 Trumbull Stre			03 2	5 2010	
	City New Haven		State CT	Zip Code 06511		Amount of Each	Disbursement this Period
	Purpose of Disbursen Support for Rosa DeL						1000.00
	Candidate Name Rep. Rosa L. DeLa	auro			Category/ Type		
	Office Sought: X	House Senate President	Disbursement For: X Primary Other (sp	2010 General pecify)			
		strict: 03					
	Full Name (Last, First Schwartz for Cong					Transaction ID: Date of Disburse	B4FEB04CB8F234EEB ement
		Allyson Schwart P.O. Box 45706	z for Congress			03 1	7 2010
	City Philadelphia		State PA	Zip Code 19149		Amount of Each	Disbursement this Period
	Purpose of Disbursen Rep. Allyson Schwart:					L	1000.00
	Candidate Name Rep. Allyson Y. Sc				Category/ Type		
	Office Sought: X	House Senate President	Disbursement For: X Primary Other (sp	2010 General	Zr -	-	
	State: PA Dis	strict: 13					
			(optional)				3000.00

A.

В.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s) for each category of the Detailed Summary Page		R LINI		E NUMBER:					PAGE 15/15				
TEMIZED DISBURSEMENTS			21b 27	H	22 28a	X	23 28b	Н	24 28c	F		25 29		26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the nam														
NAME OF COMMITTEE (In Full) American Dietetic Association Political Act	tion Committee													
Full Name (Last, First, Middle Initial) Congresswoman Diana DeGette				- 1	Date		on ID:	eme		90				BD8A
Mailing Address DIANA DEGETTE FOR (P.O. Box 61337	CONGRESS INC				0 ^M 3	IVI	1	1 ^D	Ľ	_	2 0	10	_	
City Denver	State Zip Code CO 80206-8337				Amount of Each Disbursement this Period 1000.00				d					
Purpose of Disbursement Diana DeGette [CO-1-D]		Ů												
Candidate Name Rep. Diana DeGette		Catego Type	-											
Senate X President	ement For: 2010 Primary General Other (specify)													
State: CO District: 01 Full Name (Last, First, Middle Initial)				+	Tranc	acti	on ID		ROE /	ΛR		1 B 0 3	 R/I	
Doggett for US Congress					Date (isburs	eme	-	Υ				J430
Mailing Address Doggett for US Congress PO Box 5843	3				0 3		2	29			20	10	_	
City Austin	State Zip Code TX 78763				Amou	int o	f Each	n Dis	burse	_			erio	d
Purpose of Disbursement Support for Rep. Doggett [D-TX]					1500.00									
Candidate Name Rep. Lloyd Doggett		Catego Type	•											
	ement For: 2010 Primary General Other (specify)													

SUBTOTAL of Disbursements This Page (optional)		2500.00
TOTAL This Period (last page this line number only)	•	11500.00